

# MOBILITY PARKING PERMIT APPLICATION TONO RAIHANA TŪNGA WAKA



CCS  
disability action  
Including all people

TE HUNGA HAUA MAURI MO NGA TANGATA KATOA

**Part A: This portion to be correctly completed by or on behalf of the applicant prior to Part B being completed**  
**Wāhanga A: Me whakaoti rawa tēnei wāhanga e te kaitono e tana kaiāwhina rānei i mua mai i te wāhanga E**

Title: Mr/Mrs/Ms/Miss/Master/Other, please state

Family Name:

First Name:

Date of Birth:     /     /

Residential Address:

Suburb:

City:

Postcode:

Postal Address if different:

Telephone: Home

Business

Mobile

Please tick (one only) if you are the:    Driver    Passenger    Both

(Note: Please ensure that names and date of birth are correctly completed or application will be returned)

Email:

Please tick this box if you wish to receive **electronic** updates, newsletters, reminders, invitations, and other promotional or commercial messages that CCS Disability Action believes may be of interest to you. (Tohua mai tēnei pouaka kia whiwhi i ngā pānui rorohiko, ngā nūreta, ngā whakamaharatanga, ngā tono, me ētahi atu pānui whakatairanga, pānui tauhoko rānei a te CCS Disability Action).



**Part C: This portion to be completed by or on behalf  
of the applicant**  
**Wāhanga I: Me whakaoti rawa tēnei wāhanga e te kaitono  
e tana kaiāwhina rānei**

**Declaration**

[Please sign and return with your payment to the nearest CCS Disability Action branch]

**Whakapuakitanga**

[Tēnā hainatia ka whakahoki tahitia mai me tō moni utu ki te pekanga o CCS Disability Action e tata ana]

I authorise CCS Disability Action to collect the personal information that I supply in this form and agree that CCS Disability Action and its authorised representatives may use that personal information for the operation, administration, and enforcement of the Mobility Parking Permit Scheme (the Permitted Purpose). I agree that CCS Disability Action may disclose the personal information that CCS Disability Action holds about me to the Ministry of Transport, councils, other local territorial authorities, authorised traffic enforcement agencies (including wheel clamping companies), and to any other person or organisation (Third Parties) who needs to know my personal information in order to assist with the Permitted Purpose. The Third Parties may collect, use and verify my personal information for the Permitted Purpose, and they may disclose any information that they collect to CCS Disability Action and other Third Parties for the Permitted Purpose. Under the Privacy Act 1993, where CCS Disability Action holds my personal information in such a way that it can readily be retrieved, I am entitled to have access to that information, and I can request the correction of that information.

E whakaae ana au mā CCS Disability Action e kohikohi ngā kōrero mōku e tuhi nei au ki tēnei pepa, ā, e whakaae ana hoki mā CCS Disability Action me ana hoa mahi e whakamahi ēnei kōrero mōku hei whakahaere, hei whakamana hoki i te kaupapa Raihana Tūnga Waka (te Kaupapa Pū). E whakaae ana au mā CCS Disability Action e whakaatu ēnei kōrero mōku i a ia ki Ararau Aotearoa, ki ngā kaunihera, me ētahi atu rōpū whaimana takiwā, rōpū whakahaere rori (tae noa ki ngā kamupene whakamau wīra), ā ki ētahi atu hoki tangata rōpū rānei (Pāti Tuatoru) e tika ana kia mōhio hei whakatutuki i te Kaupapa Pū. Mā aua tāngata rōpū rānei e kohikohi, e whakamahi e whakamana rānei ēnei kōrero mōu i raro i te Kaupapa Pū ā, mā rātou hoki aua kōrero e whakaatu ki CCS Disability Action me ētahi atu tāngata rōpū rānei hāngai ki te Kaupapa Pū. I raro i te ture Privacy Act 1993, inā mau ana i CCS Disability Action ngā kōrero mōu e māmā ana ki te tiki, kei te āhei koe ki aua kōrero, ka āhei hoki ki te whakatikatika i aua kōrero rā.

**Please ensure parts A, B and C have been completed before signing.  
For Fee and Payment options please see page 4**

**Signed:**

**Date:**       /       /

If not signed by applicant, state capacity of signatory:



# MOBILITY PARKING PERMIT INFORMATION WHAKAMĀRAMA RAIHANA TŪNGA WAKA



TE HUNGA HAUA MAURI MO NGA TANGATA KATOA

## WHAT IS THE MOBILITY PARKING PERMIT?

Mobility Parking Permits are an authority to use:

- Accessible car parks [outlined in yellow and displaying the wheelchair symbol]
- Standard car parks and metered spaces for longer than stated times, and
- Many time restricted zones, eg P30 for longer than stated times (as set out in local bylaws)

Please check with local council regarding rules.

Eligibility criteria are displayed on the application form.

## HE AHA NEI TE RAIHANA TŪNGA WAKA

He whakamana ā-ture te Raihana Tūnga Waka mō te:

- Tūnga waka hauā [tohua ana ki te kōwhai me te tohu tūru wīra]
- Tūnga waka noa me ngā tūnga utu e roa ake ana i te wā tohua, ā
- Tūnga wā rāhui, pēnei i te P30 e roa ake ana i te wā tohua (i raro i ngā ture ā-rohe)

Mō ngā ture, tirohia ngā ture a tō kaunihera ā-rohe

Ko ngā tikanga whakawhiwhi kei te āpitihanga pepa tono nei

## CONDITIONS OF MOBILITY PARKING PERMITS

- All qualifying applicants receive a Mobility Parking Permit with their personal number and expiry date. Membership is NOT transferable.
- The Mobility Parking Permit must be displayed clearly on the inside of the front windscreen or the dashboard ONLY when the permit holder is using the vehicle and the parking space is being used for the benefit of the Mobility Parking Permit holder.
- The Mobility Parking Permit must not be permanently affixed to the vehicle.
- CCS Disability Action reserves the right to decline any application that it considers does not meet the eligibility criteria or to cancel or withdraw any Mobility Parking Permit for incorrect usage.
- Permits remain the property of CCS Disability Action and must be returned to the nearest branch if no longer required by the permit holder.
- The permit holder must ensure that their permit is valid at all times and, if required, renew the permit before it expires at the end of the month and year marked on the Mobility Parking Permit.

## NGĀ TURE O TE RAIHANA TŪNGA WAKA

- Ka whiwhi ngā kaitono katoa e whakaaetia ana ki te Raihana me tāna ake nama rēhita me te wā whakamana. Kāore e taea te memaanga te whakawhiwhi ki tētahi atu.
- Me whakaatu rawa te Raihana Tūnga Waka kia mārama te kite atu ki roto i te wini mataaho, ki runga rānei i te kāuta o te waka i te wā anake e whakamahia ana te waka e te Kaipupuri Raihana, ā, i te wā hoki e whakatūngia ana te waka e te Kaipupuri Raihana ki ngā tūnga waka.
- Kia kaua te Raihana Tūnga Waka e whakamau tuturungia ki te waka.
- Kei a CCS Disability Action tonu te tikanga kia kaua e whakaaetia ngā tono mai ki ōna whakaaro kāore i te whakatutuki i ngā ritenga, tērā rānei ki te whakakore atu ki te aukati rānei inā hapa kē ana te whakamahi i te Raihana Tūnga Waka.
- Ka mau tonu i te CCS Disability Action te mana o ngā raihana, ka mutu, me whakahoki mai anō ki te pekanga tata inā mutu ana te whakamahia e te kaipupuri raihana.
- Kei te kaipupuri raihana mō te whakamana ā-ture i tāna raihana i ngā wā katoa, ā, inā tika atu, me whakahou hoki te raihana i mua i te paunga, a rā te tau me te marama pau ai i tohua ki runga i te raihana.

**For an application form contact your nearest  
CCS Disability Action branch or agency  
or for more information visit our website  
[www.ccsdisabilityaction.org.nz](http://www.ccsdisabilityaction.org.nz) or phone 0800 227 2255**

**How Much Does A Permit Cost:**

**Long term disability** [Five year term **\$45 - GST inclusive**]

**Short term disability** [Up to 12 months **\$30 - GST inclusive**]

[There is no charge for an extension of a short term permit **within the same 12 month period**]

Please note, once a short term permit has expired or cannot be further extended within the initial 12 months period, then the permit holder must go back to the medical practitioner to have another application form signed, and a new fee must be paid.

**Please contact the Service Centre to confirm their opening hours and payment options.**

<b>Service Centre</b>	<b>Address</b>	<b>Telephone</b>
Auckland	6-8 Omega Street, Albany, Auckland (PO Box 6450, Wellesley Street, Auckland 1141)	09) 414 9780
Bay of Plenty	74 14th Avenue, Tauranga (PO Box 2148, Tauranga 3140)	07) 578 0063
Canterbury & West Coast	220-224 Lichfield Street, Christchurch (PO Box 8066, Christchurch 8440)	03) 365 5661
Hawkes Bay	Cnr Station/Munroe Streets, Napier (PO Box 507, Napier 4140)	06) 834 0499
Manawatu	248 Broadway Avenue, Palmerston North (PO Box 143, Palmerston North 4440)	06) 357 2119
Marlborough	9 Sinclair Street, Blenheim (PO Box 533, Blenheim 7240)	03) 578 1170
Nelson	65 Trafalgar Street, Nelson (PO Box 586, Nelson 7040)	03) 548 4479
Northland	291 Kamo Road, Whangarei (PO Box 8035, Kensington, Whangarei 0145)	09) 437 1899
North Taranaki	McKendrick House, 112 Vivian Street, New Plymouth (PO Box 324, New Plymouth 4340)	06) 758 5423
Otago	514 Great King Street, Dunedin (PO Box 6174, Dunedin 9059)	03) 477 4117
South/Central Taranaki	85-87 Princes Street, Hawera (PO Box 687, Hawera 4640)	06) 278 7212
South Canterbury	2-4 Victoria Street, Timaru (PO Box 585, Timaru 7940)	03) 684 7151
Southland	142 Don Street, Invercargill (PO Box 492 Invercargill 9840)	03) 218 9696
Tairāwhiti HB	7 Ormond Road, Gisborne (PO Box 15, Gisborne 4040)	06) 867 1249
Waikato	17 Claudelands Road, Claudelands, Hamilton (PO Box 272, Hamilton 3240)	07) 853 9761
Wairarapa	371 Queen Street, YMCA, Masterton (PO Box 498, Masterton 5840)	06) 378 2426
Waitaki	316 Thames Highway, Oamaru (PO Box 468, Oamaru 9444)	03) 437 9005
Wellington	Level 2, 191 High Street, Lower Hutt (PO Box 30759, Lower Hutt 5040)	04) 568 9000